

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Majority PAC

ADDRESS (number and street)

700 13th Street, NW

Suite 600

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00484642

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Rebecca Lambe

Signature of Treasurer

Electronically Filed by Rebecca Lambe

Date

07

29

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Majority PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	174488.51
(b) Cash on Hand at Beginning of Reporting Period	174488.51	
(c) Total Receipts (from Line 19)	1082407.25	1082407.25
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1256895.76	1256895.76
7. Total Disbursements (from Line 31)	180266.80	180266.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1076628.96	1076628.96
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Majority PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	780800.00	780800.00
(ii) Unitemized	30630.90	30630.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)	811430.90	811430.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	260000.00	260000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1071430.90	1071430.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	10976.35	10976.35
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1082407.25	1082407.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1082407.25	1082407.25

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	114883.33	114883.33	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	114883.33	114883.33	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	65383.47	65383.47	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	180266.80	180266.80	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	180266.80	180266.80	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1071430.90	1071430.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1071430.90	1071430.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	114883.33	114883.33
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	114883.33	114883.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

JHJM Nevada I, LLC

Mailing Address 3745 Las Vegas Boulevard South

City

Las Vegas

State

NV

Zip Code

89109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 1 1

Transaction ID: C18796051

Amount of Each Receipt this Period

100000.00

B.

Full Name (Last, First, Middle Initial)

Garrison Keillor

Mailing Address 294 Summit

City

Saint Paul

State

MN

Zip Code

55102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Writer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796241

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Allan Burns

Mailing Address 10100 Santa Monica Blvd. Suite 105

City

Los Angeles

State

CA

Zip Code

90067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Writer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796251

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

100500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Young

Mailing Address 3 Evergreen Avenue

City

Clifton Park

State

NY

Zip Code

12065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Xerox Corporation

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796501

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

William E. Little, Jr.

Mailing Address 1107 Fifth Avenue

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 1

Transaction ID: C18796052

Amount of Each Receipt this Period

150000.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey Brock

Mailing Address 179 Avenue at the Common

City

Shrewsbury

State

MA

Zip Code

07702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796542

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

151250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Rachael Solem

Mailing Address 5 Bacon Street

City

Wellesley

State

MA

Zip Code

02482

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Hotelier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796912

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Guy D. Gundlach

Mailing Address 2700 Las Vegas Boulevard S
Unit 3603

City

Las Vegas

State

NV

Zip Code

89109

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: C18796053

Amount of Each Receipt this Period

100000.00

C.

Full Name (Last, First, Middle Initial)

Peter Vandergrinten

Mailing Address 373 Arrowhead Trail

City

Eatonton

State

GA

Zip Code

31024

FEC ID number of contributing
federal political committee.

C

Name of Employer
dbMotion Inc

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 1

Transaction ID: C18796213

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

100500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Michael Musetta

Mailing Address 2314 North Riverside Drive

City

Tampa

State

FL

Zip Code

33602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michael Musetta & Associa-
tes, Inc.

Occupation

Court Reporter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18797033

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Guy D. Gundlach

Mailing Address 2700 Las Vegas Boulevard S
Unit 3603

City

Las Vegas

State

NV

Zip Code

89109

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: C18796085

Amount of Each Receipt this Period

50000.00

C.

Full Name (Last, First, Middle Initial)

Ben Stein

Mailing Address 410 Oakwynne Drive

City

Wynnewood

State

PA

Zip Code

19096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Accountant & Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796565

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

50550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

James Mork

Mailing Address 3152 40th Ave S

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796925

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James Miner

Mailing Address 2319 E 36th Street

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796945

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

William C. Valaika

Mailing Address 4770 Campus Dr., Suite 220

City

Newport Beach,

State

CA

Zip Code

92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Real Estate Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: C18796165

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Daniel Weinreb

Mailing Address 52 Locust Ave

City

Lexington

State

MA

Zip Code

2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Google, Inc.

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 1

Transaction ID: C18796336

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Dorothy Stoneman

Mailing Address 366 Marsh Street

City

Belmont

State

MA

Zip Code

02478

FEC ID number of contributing
federal political committee.

C

Name of Employer
YouthBuild USA

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 1

Transaction ID: C18796846

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Baron & Budd, PC

Mailing Address 3102 Oak Lawn Avenue
Suite 1100

City

Dallas

State

TX

Zip Code

75219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: C18796087

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional)

25500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Joanne Lyman

Mailing Address 163 East 81st Street

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796297

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jonathan Leonhart

Mailing Address 4001 Glen Elm Drive NE

City

Cedar Rapids

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796477

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Stuart Altman

Mailing Address 11 Bakers Hill Road

City

Weston

State

MA

Zip Code

2493

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brandeis University

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 1

Transaction ID: C18796187

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Elaine McKay Family Inv. LP

Mailing Address 39 Emerald Bay

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 1 1

Transaction ID: C18796088

Amount of Each Receipt this Period

100000.00

B.

Full Name (Last, First, Middle Initial)

Alice Daniel

Mailing Address 80 Grozier Road

City

Cambridge

State

MA

Zip Code

02138-3315

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: C18796498

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Stephen L. Bing

Mailing Address 15821 Ventura Boulevard
Suite 500

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Film Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 1 1

Transaction ID: C18796089

Amount of Each Receipt this Period

250000.00

SUBTOTAL of Receipts This Page (optional)

350250.00

TOTAL This Period (last page this line number only)

780800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Service Employees International Union COPE

Mailing Address 1800 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 1

Transaction ID: C18796054

Amount of Each Receipt this Period

250000.00

B.

Full Name (Last, First, Middle Initial)

Searchlight Leadership Fund

Mailing Address 700 13th Street, NW
Suite 600

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

C00327395

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 1

Transaction ID: C18796056

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

IMPACT

Mailing Address 60 East 42nd Street
Suite 437

City

New York

State

NY

Zip Code

10165

FEC ID number of contributing
federal political committee.

C

C00348607

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 1 1

Transaction ID: C18796078

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

260000.00

TOTAL This Period (last page this line number only)

260000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Shorr Johnson Magnus

Mailing Address 1831 Chestnut Street
Sixth Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9658.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 1 1

Transaction ID: C18796046

Amount of Each Receipt this Period

3635.03

Refund of Independent Exp-
enditure Expenses

B.

Full Name (Last, First, Middle Initial)

MSR

Mailing Address 11350 Random Hills Road, Suite 670

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1317.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 1 1

Transaction ID: C18796047

Amount of Each Receipt this Period

1317.80

Refund of Independent Exp-
enditure Expenses

C.

Full Name (Last, First, Middle Initial)

Shorr Johnson Magnus

Mailing Address 1831 Chestnut Street
Sixth Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9658.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 1 1

Transaction ID: C18797317

Amount of Each Receipt this Period

4250.00

Refund of Independent Exp-
enditure Expenses

SUBTOTAL of Receipts This Page (optional)

9202.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Majority PAC

A.

Full Name (Last, First, Middle Initial)

Shorr Johnson Magnus

Mailing Address 1831 Chestnut Street
Sixth Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9658.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 1 1

Transaction ID: C18797318

Amount of Each Receipt this Period

1773.52

Refund of Independent Exp-
enditure Expenses

SUBTOTAL of Receipts This Page (optional)

1773.52

TOTAL This Period (last page this line number only)

10976.35

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Jake Perry, LLC

Mailing Address 1664 Beekman Place, NW
Unit D

City Washington State DC Zip Code 20009

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D418260

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)
Perkins Coie, LLP

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D418150

Date of Disbursement

06 / 09 / 2011

Amount of Each Disbursement this Period

6292.65

C.

Full Name (Last, First, Middle Initial)
Monica Dixon

Mailing Address 5113 Duvall Drive

City Bethesda State MD Zip Code 20816

Purpose of Disbursement
Reimbursement - Travel & Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D418091

Date of Disbursement

06 / 28 / 2011

Amount of Each Disbursement this Period

1411.80

SUBTOTAL of Disbursements This Page (optional)

22704.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Project New West</p> <p>Mailing Address 191 University Boulevard #831</p> <p>City Denver State CO Zip Code 80206</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418151 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>12000.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ariel Hayes</p> <p>Mailing Address 1712 16th Street, NW #404</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Research Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418022 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>5000.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 3060 Williams Drive Suite 200</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418152 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 0 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>81.90</div> </p>

SUBTOTAL of Disbursements This Page (optional)

17081.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
NGP VAN, Inc.

Mailing Address 1101 15th Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D418023

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D418153

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
NGP VAN, Inc.

Mailing Address 1101 15th Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D418024

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

1206.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) A.J. Goodman Consulting</p> <p>Mailing Address 1718 M Street, NW #230</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418144</p> <p>Date of Disbursement 06 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 10000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 3060 Williams Drive Suite 200</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418154</p> <p>Date of Disbursement 03 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 41.34</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <p>Mailing Address 700 13th Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Legal & Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418025</p> <p>Date of Disbursement 01 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 15036.21</p>

SUBTOTAL of Disbursements This Page (optional)

25077.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) NGP VAN, Inc.</p> <p>Mailing Address 1101 15th Street, NW Suite 500</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Database Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418075</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>05192011</div> </p> <p>Amount of Each Disbursement this Period <div>600.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 3060 Williams Drive Suite 200</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418155</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>04112011</div> </p> <p>Amount of Each Disbursement this Period <div>41.34</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <p>Mailing Address 700 13th Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Legal & Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418076</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>05192011</div> </p> <p>Amount of Each Disbursement this Period <div>9579.23</div> </p>

SUBTOTAL of Disbursements This Page (optional)

10220.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D418156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

47.17

B.

Full Name (Last, First, Middle Initial)
Perkins Coie, LLP

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D418026

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10001.20

C.

Full Name (Last, First, Middle Initial)
Perkins Coie, LLP

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D418027

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5055.62

SUBTOTAL of Disbursements This Page (optional)

15103.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Majority PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Blue State Digital</p> <p>Mailing Address 406 7th Street, NW 3rd Floor</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Technology Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418087</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 995.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Colleen E. Schell</p> <p>Mailing Address 910 M Street, NW Apt 510</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418077</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 2292.17</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jake Perry, LLC</p> <p>Mailing Address 1664 Beekman Place, NW Unit D</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D418028</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 15000.00</p>

SUBTOTAL of Disbursements This Page (optional)

18287.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D418078

Date of Disbursement

06 / 01 / 2011

Amount of Each Disbursement this Period

937.33

B.

Full Name (Last, First, Middle Initial)
Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D418079

Date of Disbursement

06 / 01 / 2011

Amount of Each Disbursement this Period

93.48

C.

Full Name (Last, First, Middle Initial)
Rebecca Lambe

Mailing Address 12025 La Palmera Avenue

City Las Vegas State NV Zip Code 89138

Purpose of Disbursement
Reimbursement - Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D418149

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

3553.19

SUBTOTAL of Disbursements This Page (optional)

4584.00

TOTAL This Period (last page this line number only)

114265.77

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Majority PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484642 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Waterfront Strategies		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 07</div> <div style="border: 1px solid black; padding: 2px;">Y 2011</div> </div>	
Mailing Address 1010 Wisconsin Avenue, NW Suite 800		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">30000.00</div>	
City State Zip Code Washington DC 20007		Transaction ID: D417862	
Purpose of Expenditure Media Buy		Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Kent G Conrad		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2012	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">32444.86</div>			
Full Name (Last, First, Middle, Initial) of Payee Ralston Lapp Media		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 07</div> <div style="border: 1px solid black; padding: 2px;">Y 2011</div> </div>	
Mailing Address 329 K Street, NW Suite 101		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2444.86</div>	
City State Zip Code Washington DC 20007		Transaction ID: D417863	
Purpose of Expenditure Production Services		Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Kent G Conrad		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2012	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">32444.86</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">32444.86</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Rebecca Lambe Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2011</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Majority PAC		FEC IDENTIFICATION NUMBER C C00484642	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Waterfront Strategies		Date MM / DD / YYYY 06 / 28 / 2011	
Mailing Address 1010 Wisconsin Avenue, NW Suite 800		Amount 28227.00	
City State Zip Code Washington DC 20007		Transaction ID: D418089	
Purpose of Expenditure Media Buy		Office Sought: <input checked="" type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32938.61		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2012	
Full Name (Last, First, Middle, Initial) of Payee Waterfront Strategies		Date MM / DD / YYYY 06 / 28 / 2011	
Mailing Address 1010 Wisconsin Avenue, NW Suite 800		Amount 4711.61	
City State Zip Code Washington DC 20007		Transaction ID: D418090	
Purpose of Expenditure Production Costs		Office Sought: <input checked="" type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32938.61		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2012	
(a) SUBTOTAL of Itemized Independent Expenditures		32938.61	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		65383.47	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Rebecca Lambe Signature		Date MM / DD / YYYY 07 / 29 / 2011	